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Rev. 5/2017 Prisoner Complaint

FILED

JUN 11 2018

United States District Court  
Eastern District of North Carolina  
Western Division

PETER A. MOORE, JR., CLERK  
US DISTRICT COURT, EDNC  
BY [Signature] DEP CLK

Case No. 5:18-CT-3136

(To be filled out by Clerk's Office only)

WILL ANDERSON #37075-118

P.O. Box 1500; Butler, NC 27509

(In the space above enter the full name(s) of the plaintiff(s).)

Inmate Number 37075-118

COMPLAINT

(Pro Se Prisoner)

-against-

UNITED STATES OF AMERICA,  
et al.

Jury Demand?

☒ Yes

☐ No

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Section IV. Do not include addresses here.)

NOTICE

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

## I. COMPLAINT

Indicate below the federal legal basis for your claim, if known. This form is designed primarily for pro se prisoners challenging the constitutionality of their conditions of confinement, claims which are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

- ☐ 42 U.S.C. § 1983 (state, county, or municipal defendants)
- ☐ Action under *Bivens v. Six Unknown Federal Narcotics Agents*, 403 U.S. 388 (1971) (federal defendants)
- ☒ Action under Federal Tort Claims Act (United States is the proper defendant; must have presented claim in writing to the appropriate Federal agency and received a notice of final denial of the claim pursuant to 28 U.S.C. § 2401(b))

## II. PLAINTIFF INFORMATION

WILL ANDERSON #37075-118

Name

#FED. REG. 37075-118

Prisoner ID #

FEDERAL CORRECTION INSTITUTION 2

Place of Detention

P.O. Box 1500 / FCI-2

Institutional Address

BUTLER

City

NC

State

27509

Zip Code

## III. PRISONER STATUS

Indicate whether you are a prisoner or other confined person as follows:

- ☐ Pretrial detainee    ☐ State    ☐ Federal
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☐ Convicted and sentenced state prisoner
- ☒ Convicted and sentenced federal prisoner

#### IV. DEFENDANT(S) INFORMATION

Please list the following information for each defendant. If the correct information is not provided, it could result in the delay or prevention of service. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant 1: UNITED STATES OF AMERICA  
Name CIVIL DIVISION  
U.S. DEPARTMENT OF JUSTICE  
Current Job Title  
10th AND PENN. AVE. N.W.  
Current Work Address  
Washington DC 20001  
City State Zip Code

Capacity in which being sued: ☐ Individual ☒ Official ☐ Both

Defendant 2: KIPATRICK, MEDICAL ADMINISTRATOR  
Name  
FCI-2 HEALTH SERVICE ADMINISTRATOR  
Current Job Title  
P.O. 1500 (FCI-2)  
Current Work Address  
BUTNER NC 27509  
City State Zip Code

Capacity in which being sued: ☐ Individual ☒ Official ☐ Both

**Defendant(s) Continued**

Defendant 3: MRS. HERANDEZ  
Name  
FLE2 Unit Manager For M-Unit Bldg.  
Current Job Title  
P.O. Box 1500  
Current Work Address  
Bethel, NC 27509  
City State Zip Code

Capacity in which being sued: ☐ Individual ☒ Official ☐ Both

**Defendant 4:**

Name  
  
Current Job Title  
  
Current Work Address  
  
City State Zip Code

Capacity in which being sued: ☐ Individual ☐ Official ☐ Both

V. STATEMENT OF CLAIM

Place(s) of occurrence: FEDERAL CORRECTIONAL INSTITUTION - 2 / M-UNIT WALKWAY

Date(s) of occurrence: FEBRUARY 10, 2018 Approximately 7:30 AM

State which of your federal constitutional or federal statutory rights have been violated:

NEGLECTED TO FOLLOW FEDERAL BUREAU OF PRISONS MEDICAL POLICIES  
STATEMENT #040.04 IN NON-DISCRIMINATION TO INMATES AND P.S. #  
(STANDARD OF EMPLOYEE CONDUCT); FIRST AND FIFTH CONSTITUTIONAL AMENDMENTS  
 State here briefly the FACTS that support your case. Describe how each defendant was personally involved in the alleged wrongful actions, state whether you were physically injured as a result of those actions, and if so, state your injury and what medical attention was provided to you.

FACTS: I address Unit Manager Mrs. Herandez I NEED TO BE REMOVED OFF M/C Unit 25th UP STAIR AND PLACE ON THE Bottom Unit M/A AS NO LONGER TO UP AND DOWN M/C Unit UNLESS WITH THE ASSIST OF (R. Robinson #69811-007) AND (Bertram White #11555-104) TO REACH TOP OF M/C Unit. AT ALL TIME MRS. HERANDEZ Unit COULD HAVE PREVENT THE PLAINTIFF FROM FALLEN FROM PHYSICAL WEAKNESS BY REMOVING him TO Bottom RANGE M/A Unit AFTER SHE WITNESSED MR. ANDERSON COULD NOT TRAVEL UP AND DOWN FIGHT OF STAIRWAY. MRS. HERANDEZ Unit Manager is VINDICTIVE <sup>MATTER</sup> LEFT THE decision MAKING ON MEDICAL ADMINISTRATOR WHERE SHE COULD HAD MADE THE SAME decision TO REMOVE MR. ANDERSON ON Bottom Unit CONDUCTIVE TO HIS

Who did what to you?

"Health and Care Level (3) with "RHEUMATOID ARTHRITIS"  
 NEGLECTED TO PREVENT WITHIN HER DUTY AND RESPONSIBILITIES CARE, CONTROL, AND CUSTODY BY BOP'S HEALTH CARE PROGRAM STATEMENT. SEE ATTACHED EXHIBIT "A."

What happened to you?

MEDICAL STAFF HERE HAVE REFUSE TO FOLLOWS FEDERAL BUREAU OF PRISONS' LOCKDOWN "FLU PRETEXT QUARANTINE WITHOUT PRIOR STAFF NOTIFICATION FOR FIVE DAYS. MEDICAL ADMINISTRATOR KILPATRICK DID NOT LET MYSELF AND OTHER INMATES THEY WERE IN CUSTODY ~~AND~~ TO NO MEAT TRAYS, NO MEDICATION UNTIL MC UNIT OPEN BACK UP. IN THE MEANTIME ALL MEDICATION PAIN ETC MUST BE BROUGHT IN. COMMISSARY THAT WAS NOT BOP'S POLICY STATEMENT UPON EVICTION AND NOT POLICY. PLAINTIFF WENT FOR 5 DAYS WITHOUT A WHOLESOME MEAL FOLLOWING HIS TEACHER, LEADER BOOKS "HOW TO EAT TO LIVE, I-IT BOOKS. VIOLATION OF PLAINTIFF RELIGION PRIVILEGE RIGHTS

When did it happen to you?

ON OR ABOUT FEBRUARY 11, 2018 (SUNDAY MORNING) APPROXIMATELY 7:30 AM COMING DOWN FLIGHT OF MC UNIT STAIRWAY ONTO THE WALKWAY WHERE FELT DIZZY AND PASS OUT. NEXT INSTITUTION DOCTOR SIGNED ME OFF TO GO TO DUKE'S REGION HOSPITAL WHERE I STAYED THERE FOR TWO DAYS. (I DO NOT KNOW EXACTLY WHAT THE CAUSE UNTIL (DISCOVERY) MALNUTRITION? STROKE?

Where did it happen to you?

MC UNIT OUTSIDE STAIRWAY AT THE BOTTOM OF WALKWAY AT FLT-2 IN FRONT OF M UNIT WHERE I FELL AND PASS OUT

What was  
your  
injury?

(1) 5 FIVE STITCHES ON RIGHT SIDE OF THE FOREHEAD

(2) DOUBLE VISION IN BOTH EYES

(3) LOST HIS EQUILIBRIUM (PHYSICAL) BALANCE WHERE MUST USE "WALKER" TO ENHANCE HIS MOVEMENTS STANDING UP AND SITTING DOWN CAUSE CAME ABOUT AFTER HIS STROKE ON FEBRUARY 11, 2018.

## VI. ADMINISTRATIVE PROCEDURES

**WARNING:** Prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions. 42 U.S.C. § 1997e(a). Your case may be dismissed if you have not exhausted your administrative remedies.

Have you filed a grievance concerning the facts relating to this complaint? ☒ Yes ☐ No

If no, explain why not:

N/A

Is the grievance process completed?

☒ Yes ☐ No

If no, explain why not:

## VII. RELIEF

State briefly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes. (1) BE AWARDED IN AMOUNT OF \$250,000 FOR NEGLIGENCE CAUSE OF INJURIES.

- (2) BE GIVEN pro BONA CIVIL ATTORNEY TO LEGAL REPRESENTATION TO FURTHER INVESTIGATION TO GATHER ALL THE PERTINENT MEDICAL RECORDS; OBTAIN PLAINTIFFS AFFIDAVITS OF WITNESSES NAMED IN COMPLAINT; GATHER ALL ESSENTIAL POLICY STATEMENTS SUPPORT DERELICTION TO PERFORM A DUTY AND RESPONSIBILITIES ON PRETEXT FLU LOCKDOWNS FOR (5) DAYS.
- (3) BE AWARDED punitive Damage AND COMPENSATION FOR NEGLIGENCE OF PREVENT PERSONAL INJURIES. ANY OTHER JUST CAUSE IS APPROPRIATE FAIR AND JUST BY THIS HONORABLE COURT.



### VIII. PRISONER'S LITIGATION HISTORY

*The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in forma pauperis in federal court if that prisoner has "on three or more occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28*

U.S.C. §1915(g).

Have you brought any other lawsuits in state or federal court while a prisoner?

☒ Yes ☐ No

If yes, how many? ONE?

Number each different lawsuit below and include the following:

- Name of case (including defendants' names), court, and docket number
- Nature of claim made
- How did it end? (For example, if it was dismissed, appealed, or is still pending, explain below.)

Class Action Lawsuit: Elijah KARRIEM, et al.  
vs- District of Columbia, GOVERNMENT, et al.  
docket No. (?) U.S. District Courthouse  
in 1999; RESULTS DEFENDANTS MADE PROPOSAL  
OUT OF COURT SETTLEMENT \$25,000, FOR DIVIDED  
by (4) MEMBERS AS PLAINTIFFS FINALIZED BY ATTORNEYS  
PRO BOSSA WILSON, REIN AND FIELDING K ST., N.W. DC 20006.  
[Cause Violation of Religion - Diet in Violation  
OF THEIR FIRST AMENDMENT RIGHT TO EXERCISE]

**IX. PLAINTIFF'S DECLARATION AND WARNING**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending or modifying existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

*Each Plaintiff must sign and date the complaint and provide prison identification number and prison address.*

JUNE 1, 2018  
Dated

Will Anderson  
Plaintiff's Signature

WILL ANDERSON  
Printed Name

# 37075-118  
Prison Identification #

P.O. Box 1500      Butler,      NC      27509  
Prison Address                      City                      State                      Zip Code